



Request for Funds & Expert Services

Office of the Federal Public Defender

Eastern District of Virginia

TO: _____	DATE: _____
FROM: _____	FPD Case _____
CLIENT: _____	VAE Case _____

This is a supplemental request	Date of original request _____
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STATUS: _____	JURISDICTION: _____
CHARGE: _____	

SERVICE REQUESTED: _____

IF OTHER, PLEASE SPECIFY: _____

EXPERT INFORMATION - PLEASE FILL OUT ALL FIELDS

NAME _____	PHONE _____
ADDRESS _____	FAX _____
_____	EMAIL _____

BUSINESS NAME: _____

SSN # / EMPLOYER ID # _____

DESCRIPTION OF REQUESTED SERVICE (Include dates, quantities, and specific requests of the expert, such as reports, testimony, or consults)

The person named above is a qualified expert in this subject matter of field, pursuant to the criteria set forth in the *Guide* and qualifies as an "expert" under 5 U.S.C. § 3109. *Guide*, Volume 14, § 520.15

JUSTIFICATION FOR OBTAINING SERVICE

# OF UNITS REQUESTED	RATE	UNIT	TOTAL
_____	_____	_____	_____

Travel

Administrative Officer has been contacted and travel is authorized:
(It is not necessary to gain approval for regular interpreter services that are greater than 30 miles from expert's normal work area)

Expected Travel Costs: _____

GRAND TOTAL

(Notify traveler that reimbursement will only be approved for government rate, it is the travelers responsibility to stay within this rate. If traveler encounters problems obtaining government rate, please notify AdO)

<p>I, the Federal Public Defender (FPD), have reviewed and authorize this expenditure of funds</p> <p>FPD Signature: _____</p> <p>Purchase Order # _____</p>	<p><i>Leave Blank for Financial Officer</i></p>
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